

Complete Contractor Name (as it appeared on the license): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ License Number: _____

DOPL CONTRACTOR LICENSE REINSTATEMENT QUESTIONNAIRE
(FOR LICENSES THAT HAVE BEEN EXPIRED LESS THAN 2 YEARS)

Answer "yes" or "no" to questions 1 – 3 and 1 – 7. Do not leave any question unanswered.

1. _____ Has the licensee been arrested for, charged with, or convicted of a misdemeanor or felony charge in any jurisdiction during the last 2 years? Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.
2. _____ During the last 2 years has the licensee surrendered or had any disciplinary action taken against the license to practice in a regulated profession?
3. _____ Is the licensee currently under investigation or is any disciplinary action pending against the licensee now by any and all contracting or professional licensing agencies?

IF YOU ANSWERED "YES" TO ANY QUESTIONS 1-3 ABOVE, ATTACH A COMPLETE WRITTEN EXPLANATION.

1. _____ Do the licensee's total assets (total value) exceed total liabilities (what is owed)? (i.e. Does the licensee have a positive net worth?)
2. _____ Have all state and federal income taxes, payroll withholding, and unemployment insurance premiums been paid as required by law? (Answer "yes" if not applicable.)
3. _____ Have all (if any) judgments, liens, taxes, or child support payments been paid as required? (Answer "yes" if not applicable.)
4. _____ Has the licensee, while licensed under this license, reported to DOPL all instances or types of bankruptcy filings? (Answer "yes" if not applicable.)
5. _____ Has any claim paid by the Residence Lien Recovery Fund been reimbursed, in full, as required? (Answer "yes" if not applicable.)
6. _____ Has the licensee notified DOPL for every change or loss of its qualifier? (Answer "yes" if not applicable.)
7. _____ Is the licensee still the same entity the license was originally issued to? (Entity means sole prop. corporation, LLC, etc.)

IF YOU ANSWERED "NO" TO ANY QUESTIONS 1-7 ABOVE, ATTACH A COMPLETE WRITTEN EXPLANATION.

1. Current Business Entity Type: _____ (sole-proprietor, corp., partnership, LLC, etc.)
2. Qualifier Name: _____ Social Security Number: _____ Date of Birth: _____
3. Utah Division of Corporations Registration Number for Business Entity: _____
4. **Submit** current certificate for **LIABILITY INSURANCE**. (Coverage of at least \$100,000 for each incident and \$300,000 aggregate is required.) **NOTE:** Continual liability insurance coverage is required for an active license.
5. Federal Identification Number: _____ or Social Security Number: _____
6. Do you have employees? Yes ____ No ____ If yes, **submit** a current **WORKERS COMPENSATION INSURANCE CERTIFICATE**.

I, the undersigned, further certify that I am authorized to sign this Questionnaire on behalf of the applicant. The information contained in this Questionnaire is free of fraud, misrepresentation, or omission of material fact; is truthful and correct; and discloses conditions regarding the applicant's financial responsibility. I, also, understand I may be subject to audit by the Division.

Print Name of Authorized Signer

Title of Authorized Signer

Signature of Authorized Signer

Date Signed

NOTE: Save all financial statements, supporting documents (bank statements, etc.), and guaranties used to complete this questionnaire for a minimum of 2 years beyond the license issue date. Information used is subject to audit by the Division.

Reinstatement Fees:

\$113 2005 – 2007 Renewal Fee (\$0 if already paid)
\$ 50 Reinstatement Fee
\$100 LRF Reinstatement Fee, if applicable
\$125 2003-2005 LRF Special Assessment

Submit Application, Supporting Documents, and Fees to:

US Mail
DOPL
PO Box 146741
Salt Lake City UT 84114-6741

Delivery or Express Mail
DOPL
160 East 300 South, Main Lobby
Salt Lake City, UT 84111

Make Checks Payable to "DOPL"

Questions: (801) 530-6628 or (866) 275-3675 (toll-free in Utah only)

5/05